

1646

# TRANSMITTAL FORM

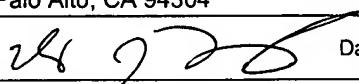
(to be used for all correspondence after initial filing)

		Application Number	10/052,664
		Filing Date	January 17, 2002
		First Named Inventor	Cannon, Paul David et al.
		Art Unit	1646
		Examiner Name	Basi, Nirmal Singh
Total Number of Pages in This Submission	21	Attorney Docket Number	ROCH-001DIV (R0058C-DIV)

## ENCLOSURES (check all that apply)

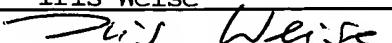
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> after vacated Notice of Allowance <input checked="" type="checkbox"/> Declaration (3 pages) of Suryanarayana Sankuratri, plus <input checked="" type="checkbox"/> 6 figures of supporting drawings, <input checked="" type="checkbox"/> Article by Pearce et al., (Biochem Biophys Res Commun.) 301:8-12, 2003. (5 pages) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s), 2 sheets <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> <li>• Return Postcard</li> </ul>
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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Signature	 David J. Chang, Reg. No. 50,374, Agent for Applicants	
Date	February 18, 2004	

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